

SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/267,719	03/11/99	424	1616	ARK00898103A

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CONTINUING DOMESTIC DATA***

VERIFIED PROVISIONAL APPLICATION NO. 60/077,763 03/12/98

371 (NAT'L STAGE) DATA***

VERIFIED

FOREIGN APPLICATIONS***

VERIFIED

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 03/30/99 ** SMALL ENTITY **

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY AR	SHEETS DRAWING 64	TOTAL CLAIMS 26	INDEPENDENT CLAIMS 15
Verified and Acknowledged Examiner's Initials _____ Initials _____					

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TITLE TERTIARY STRUCTURE OF PEANUT ALLERGEN ARA H 1

FILING FEE RECEIVED \$967	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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OK, PstH

** CONTINUING DATA *****

This appln claims benefit of 60/077,763 03/12/1998 OK, PstH

** FOREIGN APPLICATIONS *****

None, PstH

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 03/30/1999

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged Examiner's Signature: [Signature] Initials: PstH	AR	64	26	15

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TITLE

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